B1 (Official Form 1)(4/10)											
United States Bankruptcy Co Eastern District of Missouri									Vol	untary	<b>Petition</b>
Name of Debtor (if individual, enter Noble, Joshua Bryan	Name of Debtor (if individual, enter Last, First, Middle):  Noble, Joshua Bryan						ebtor (Spouse I <b>nda Gail</b>	e) (Last, First,	, Middle):		
All Other Names used by the Debtor (include married, maiden, and trade		years						Joint Debtor i trade names)		years	
Last four digits of Soc. Sec. or Indiv (if more than one, state all)	_ ∕idual-Taxpay	yer I.D. (I	TIN) No./Co	omplete E	(if more	our digits of than one, state	all)	r Individual-7	Γaxpayer I.I	D. (ITIN) N	No./Complete EIN
Street Address of Debtor (No. and S 1153 Madison 9434 Fredericktown, MO	treet, City, ar	nd State):	Γ <del></del> -	ZIP Code	Street 115 Fre		Joint Debtor	(No. and Str	reet, City, a	nd State):	ZIP Code
County of Residence or of the Prince  Madison	ipal Place of	Business:		3645		y of Reside dison	nce or of the	Principal Pla	ace of Busir	ness:	63645
Mailing Address of Debtor (if different	ent from stree	et address	):	ZIP Code		g Address	of Joint Debt	tor (if differer	nt from stre	et address):	: ZIP Code
Location of Principal Assets of Busi (if different from street address abov				211 0040							ZA COGO
Type of Debtor (Form of Organization) (Check one box)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership  Nature of Business (Check one box)  □ Health Care Business □ Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank				☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 ☐ Chapter 13 ☐ Chapter 13 ☐ Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding							
Other (If debtor is not one of the ab- check this box and state type of entity		Debto under	Tax-Exem (Check box, i or is a tax-ex Title 26 of (the Interna	if applicable xempt org the Unite	e) anization d States	defined "incurr	l in 11 U.S.C. § ed by an indivi	(Check onsumer debts,	for		es are primarily ness debts.
Filing Fee (Check one box)  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				Debtor is a sr Debtor is not if: Debtor's aggr are less than S all applicable A plan is bein Acceptances	regate nonco \$2,343,300 (as boxes: ag filed with of the plan w	debtor as definess debtor as on thingent liquidamount subject this petition.	t to adjustment	C. § 101(51D J.S.C. § 101(: luding debts on 4/01/13 a	51D).  owed to insi	iders or affiliates) ree years thereafter). reditors,	
Statistical/Administrative Informa  ☐ Debtor estimates that funds will  ☐ Debtor estimates that, after any ethere will be no funds available to the statement of the statement	be available texempt prope	erty is excl	luded and a	dministrati		es paid,		THIS	SPACE IS F	OR COURT	USE ONLY
Estimated Number of Creditors	200- 1	] ,000- 5,000	5,001-	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets  S0 to \$50,001 to \$100,000 to \$500,000 \$100,000	\$500,001 \$ to \$1 to	] 61,000,001 o \$10 nillion	\$10,000,001 to \$50	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Liabilities	\$500,001 \$ to \$1 to	] 51,000,001 o \$10 nillion	\$10,000,001 to \$50	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): **Voluntary Petition** Noble, Joshua Bryan Noble, Amanda Gail (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Kenneth A. Seufert May 13, 2011 Signature of Attorney for Debtor(s) (Date) Kenneth A. Seufert 26203/4333 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: **Exhibit D** also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

after the filing of the petition.

B1 (Official Form 1)(4/10) Page 3

### **Voluntary Petition**

(This page must be completed and filed in every case)

### Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Joshua Bryan Noble

Signature of Debtor Joshua Bryan Noble

### X /s/ Amanda Gail Noble

Signature of Joint Debtor Amanda Gail Noble

Telephone Number (If not represented by attorney)

May 13, 2011

Date

### Signature of Attorney\*

### X /s/ Kenneth A. Seufert

Signature of Attorney for Debtor(s)

#### Kenneth A. Seufert 26203/4333

Printed Name of Attorney for Debtor(s)

### Seufert & Dudley, P.C.

Firm Name

P.O. Box 831 144 Walker Road Farmington, MO 63640

Address

### Email: cwinch@seufert-dudley.com (573) 756-7555 Fax: (573) 756-9183

Telephone Number

### May 13, 2011

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Noble, Joshua Bryan Noble, Amanda Gail

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

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7	

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Eastern District of Missouri

In re	Joshua Bryan Noble Amanda Gail Noble		Case No.	
		Debtor(s)	Chapter	7

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

1	nseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	letermination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of rea	alizing and making rational decisions with respect to
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. §	109(h)(4) as physically impaired to the extent of being
The state of the s	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military c	omhat zone
1 receive minitary duty in a minitary e	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling
requirement of 11 c.s.e. § 105(n) does not apply in	tins district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Joshua Bryan Noble
Ç	Joshua Bryan Noble
Date: May 13, 2011	

B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Eastern District of Missouri

In re	Joshua Bryan Noble Amanda Gail Noble		Case No.	
		Debtor(s)	Chapter	7

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□ 4. I am not required to receive a credit counseling briefing because of: [Check the counseling briefing because of the counseling briefing briefin	he applicable
statement.] [Must be accompanied by a motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of n	nental illness or
mental deficiency so as to be incapable of realizing and making rational decisions	with respect to
financial responsibilities.);	-
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to t	he extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in personable	_
through the Internet.);	ion, by telephone, or
☐ Active military duty in a military combat zone.	
□ 5. The United States trustee or bankruptcy administrator has determined that the requirement of 11 U.S.C. § 109(h) does not apply in this district.	e credit counseling
I certify under penalty of perjury that the information provided above is true	e and correct.
Signature of Debtor: /s/ Amanda Gail Noble	
Amanda Gail Noble	
Date: May 13, 2011	

# **United States Bankruptcy Court Eastern District of Missouri**

In re	Joshua Bryan Noble,		Case No.		
	Amanda Gail Noble				
_		Debtors	Chapter	7	

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	12,862.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		11,629.32	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		226.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		17,926.04	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,092.85
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,089.00
Total Number of Sheets of ALL Schedu	ıles	20			
	To	otal Assets	12,862.00		
			Total Liabilities	29,781.36	

## **United States Bankruptcy Court Eastern District of Missouri**

In re	Joshua Bryan Noble,		Case No	
	Amanda Gail Noble			
_		Debtors	Chapter	7
			=	

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	226.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	226.00

### State the following:

Average Income (from Schedule I, Line 16)	3,092.85
Average Expenses (from Schedule J, Line 18)	3,089.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,911.66

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		4,791.32
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	226.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		17,926.04
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		22,717.36

_	
l n	***
111	16

Joshua Bryan Noble, Amanda Gail Noble

Case No.

**Debtors** 

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total >

(Total of this page)

Total >

0.00

Joshua Bryan Noble, Amanda Gail Noble

**Debtors** 

### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	J	20.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking Account, First State Community Bank	J	100.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Furniture, appliances, household furnishings, electronics	J	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothing	J	250.00
7.	Furs and jewelry.	Wedding Rings	J	500.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	x		

2 continuation sheets attached to the Schedule of Personal Property

1,870.00

Sub-Total >

(Total of this page)

In re	Joshua Bryan Noble
	Amanda Gail Noble

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.		Child support from Jeremy Lauer for minor child of Amanda Noble (271.00 per month including arrearage; \$196.00 per month without arrearage); Debtor will receive \$642.00 from Lauer's 2010 Income Tax Refund	f J	642.00
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(Tota	Sub-Tota	al > <b>642.00</b>
			(10ta	of this page)	

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

In re	Joshua Bryan Noble
	Amanda Gail Noble

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	2	002 Toyota Tundra	Н	6,100.00
	other vehicles and accessories.	2	000 Dodge Durango	J	3,500.00
		2	003 Homemade Trailer	Н	250.00
		1 N	980 Astro 15 Foot Boat, 1977 Mercury 85 Horse Notor, 1979 Boat Trailer	н	500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			
				Sub-Tota	al > 10,350.00

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Total of this page)

Total > **12,862.00** 

(Report also on Summary of Schedules)

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(Check one box)

Wedding Rings

☐ 11 U.S.C. §522(b)(2)

Joshua Bryan Noble, Amanda Gail Noble

Debtor claims the exemptions to which debtor is entitled under:

Alimony, Maintenance, Support, and Property Settlements

Child support from Jeremy Lauer for minor

1980 Astro 15 Foot Boat, 1977 Mercury 85 Horse

child of Amanda Noble (271.00 per month including arrearage; \$196.00 per month without arrearage); Debtor will receive \$642.00 from

Lauer's 2010 Income Tax Refund

☐ Check if debtor claims a homestead exemption that exceeds

\$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

500.00

642.00

500.00

500.00

642.00

500.00

**Debtors** 

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

■ 11 U.S.C. §522(b)(3)			
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand Cash	RSMo § 513.430.1(3)	20.00	20.00
<u>Checking, Savings, or Other Financial Accounts, Checking Account, First State Community Bank</u>	Certificates of Deposit RSMo § 513.430.1(3)	100.00	100.00
<u>Household Goods and Furnishings</u> Furniture, appliances, household furnishings, electronics	RSMo § 513.430.1(1)	1,000.00	1,000.00
Wearing Apparel Clothing	RSMo § 513.430.1(1)	250.00	250.00
Furs and Jewelry			

 Automobiles, Trucks, Trailers, and Other Vehicles
 RSMo § 513.430.1(5)
 2,762.00
 3,500.00

 2003 Homemade Trailer
 RSMo § 513.430.1(3)
 250.00
 250.00

RSMo § 513.430.1(3)

RSMo § 513.430.1(2)

RSMo § 513.430.1(10)(d)

Motor, 1979 Boat Trailer

Total: 6,024.00 6,762.00

In re

Joshua Bryan Noble, **Amanda Gail Noble** 

Case No.
----------

**Debtors** 

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLLQULDAT	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 5880082318			7/08	▎▘	T E D			
Wells Fargo/Wachovia P.O. Box 19657 Irvine, CA 92623		J	Purchase Money Security 2002 Toyota Tundra		ט			
			Value \$ 6,100.00	1			10,891.32	4,791.32
Account No. 6201			11/10					
World Finance Company 1211 Maple Street, Unit B Farmington, MO 63640		J	Purchase Money Security 2000 Dodge Durango					
			Value \$ 3,500.00				738.00	0.00
Account No.			Value \$	-				
Account No.								
			Value \$	-				
_0 continuation sheets attached	Subtotal (Total of this page)						11,629.32	4,791.32
	Total (Report on Summary of Schedules)					11,629.32	4,791.32	

In re

Joshua Bryan Noble, **Amanda Gail Noble** 

Debtors

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total

also on the Statistical Summary of Certain Liabilities and Related Data.  Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Joshua Bryan Noble, Amanda Gail Noble

Case No.		

Debtors

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CONTINGENT CREDITOR'S NAME, SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) Account No. xxx-xx-5783 2008 Overpayment Missouri Department of Labor & Ind 0.00 **Division of Employment Security** Н P.O. Box 3100 Jefferson City, MO 65102-3100 226.00 226.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 226.00 Schedule of Creditors Holding Unsecured Priority Claims 226.00 0.00

(Report on Summary of Schedules)

226.00

226.00

In re	Joshua Bryan Noble,
	Amanda Gail Noble

Case No.
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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	00	Hu	sband, Wife, Joint, or Community	CO	U N	P	)	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	Опшвнок	J C H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONFINGEN	コーベンーロ	SPUTED	) !	AMOUNT OF CLAIM
Account No. 2927421		Γ	Opened 7/01/10	] <del> </del>	A T E		Γ	
Account Resolution Corporation 17600 Chesterfirld Ste 201 Chesterfield, MO 63005		J	Collection for Madison Medical Center		ס			392.00
Account No. 12034		Г	04/11		П		Ť	
Accounts Receivable Tracking Services P. O. Box 464 Jefferson City, MO 65102		J	Medical services - Mineral Area Pathology, LLC					10.20
Account No. <b>8858</b>		_	Opened 6/01/06 Last Active 10/26/09		Н		+	10.20
Applied Card Bank Attention: General Inquiries P. O. Box 17125 Wilmington, DE 19850		н	Credit card purchases					1,622.00
Account No. Noble		$\vdash$	2010	$\vdash$	Н	H	+	
Berlin Wheeler Inc. 711 West McCarty Street Jefferson City, MO 65101		J	Medical services for Mineral Area Pathology					10.20
		<u>_</u>			Ш		$\downarrow$	10.20
_6 continuation sheets attached			(Total of t	Subt his				2,034.40

In re	Joshua Bryan Noble,	Case No.
	Amanda Gail Noble	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community UNLIQUIDATED CODEBTOR CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM C AMOUNT OF CLAIM AND ACCOUNT NUMBER IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Opened 6/01/08 Last Active 1/29/10 Account No. 3223 Credit card purchases Capital One, N.A. J **Bankruptcy Dept** P. O. Box 5155 Norcross, GA 30091 777.00 Account No. 3744 For Mineral Area Regional Medical Center **CBS Collection Paducah** Н **100 Fulton Court** Paducah, KY 42001 469.00 Account No. 0813 For Mineral Area Regional Medical Center **CBS Collection Paducah** 100 Fulton Ct. Paducah, KY 42001 100.00 Account No. 2286066 Opened 6/01/10 Collection for St. Anthony's Medical Center **Consumer Adjustment Company** Н 12855 Tesson Ferry Rd Saint Louis, MO 63128 100.00 Account No. 6136474 Opened 1/01/11 Collection for Smile For Life Dental Care **Consumer Collection Management** Н 2333 Grissom Drive Saint Louis, MO 63146 1,945.00 Sheet no. 1 of 6 sheets attached to Schedule of Subtotal 3,391.00

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

In re	Joshua Bryan Noble,	Case No.
	Amanda Gail Noble	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community	Ις	Ų	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		CONTINGEN	I U	SPUTED	AMOUNT OF CLAIM
Account No. Noble			2010	7	A T E D		
Consumer Collection Management 2333 Grissom Drive Saint Louis, MO 63146		J	Utilities - Ameren UE		D		614.00
Account No. 8316			2010	T	T		
Consumer Collection Management Inc. P. O. Box 1839 Maryland Heights, MO 63043		J	Medical services for Parkland Health Center				353.58
Account No. <b>6245</b>	┢	H	2010	+	+	╁	
Credit Bureau Services P. O. Box 908 Cape Girardeau, MO 63702		J	Medical services				14.48
Account No. 2141			04/11	T	T	T	
Credit Bureau Systems P. O. Box 9200 Paducah, KY 42002		J	Credit card purchases				647.71
Account No. 13484384	T	H	Opened 7/01/10	十	T		
EOS CCA 700 Longwater Drive Norwell, MA 02061		J	Collection for AT&T				163.00
Sheet no. 2 of 6 sheets attached to Schedule of				Sub			1,792.77
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	

In re	Joshua Bryan Noble,	Case No.
	Amanda Gail Noble	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	QU   D	SPUTED	AMOUNT OF CLAIM
Account No. <b>9104546</b>			2010	T	A T E D		
EOS CCA 700 Longwater Drive Norwell, MA 02061		н	Creditor: AT&T		D		110.00
Account No. 5691			09/08				
Equable Ascent Financial/Hilco Rec. 1120 Lake Cook Road Suite B Buffalo Grove, IL 60089		J	Credit card purchases (Chase Bank)				
							2,008.00
Account No. 7518			Opened 5/01/06 Last Active 11/05/09 Credit card purchases				
First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107		н					
							454.00
Account No. 1015984933			Opened 1/01/10 Collection for AT&T				
Franklin Collection Services 2978 W Jackson St Tupelo, MS 38801		J					
							163.00
Account No. 4875691			Opened 7/01/10 Collection for Chase Bank USA N.A				
Hilco Receivables Attn: Bankruptcy 1120 Lake Cook Road Suite B Buffalo Grove, IL 60089		н					
				$\perp$	L	L	2,008.00
Sheet no. <u>3</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his			4,743.00

In re	Joshua Bryan Noble,	Case No.
	Amanda Gail Noble	

### Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	Ç	Ηι	usband, Wife, Joint, or Community	CO	Ţņ		D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M			L	!   !	SPUTED	AMOUNT OF CLAIM
Account No. 0919			01/07	٦٣	ΪE		Ī	
Household Credit Services P. O. Box 98706 Las Vegas, NV 89193-8706		J	Credit card purchases		D			570.00
Account No. 6819			01/07	十	T	T	T	
HSBC Bank P. O. Box 5253 Carol Stream, IL 60197		J	Credit card purchases					979.00
Account No. <b>14537</b>	Ͱ	┝	2009	+	+	+	$\dashv$	
Mark S. Schiffman, DDS 4123 Jeffco Blvd. Arnold, MO 63010-4215		J	Dental services					35.00
Account No. 2183608			Opened 10/01/10	T	Τ	Ť		
Medical Data Systems 2001 9th Avenue Suite 312 Vero Beach, FL 32960		J	Collection for Mineral Area Regional Medical Center					523.00
Account No. <b>7017</b>	$\vdash$	$\vdash$	08/10	+	+	+	$\dashv$	
Medical Services BillingTechnologies P. O. Box 22266 Chattanooga, TN 37422		J	Medical services					40.13
Sheet no4 of _6 sheets attached to Schedule of				Sub	tota	al		2,147.13
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge	;)	2,147.13

In re	Joshua Bryan Noble,	Case No.
	Amanda Gail Noble	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	QULD	SPUTE	AMOUNT OF CLAIM
Account No. 8534964661			Opened 6/01/10	<b>]</b>	A T E		
Midland Credit Management P. O. Box 939019 San Diego, CA 92193		н	Creditor: Capital One Bank Midland Funding LLC vs. Joshua Noble Case #11MD-AC00090		D		
							2,039.00
Account No. 8535706819  Midland Credit Management P. O. Box 939019 San Diego, CA 92193		н	Opened 8/01/10 Creditor: HSBC Bank Nevada N.A.				
							979.00
Account No. Noble  Mineral Area Regional Med Ct, Inc. MH 751 Maple Valley Drive, Suite B Farmington, MO 63640		J	2010 Medical services				78.69
Account No. 2235850/00159911	T		2009	$\top$			
Mineral Area Regional Medical Center 1212 Weber Road Farmington, MO 63640		J	Medical services				160.05
Account No. <b>109108316</b>	$\vdash$	$\vdash$	5/10	+	$\vdash$	$\vdash$	
Parkland Health Center P.O. Box 957683 Saint Louis, MO 63195-7683		J	Medical services				187.00
Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of	-	_	,	Subt	tota	ıl	2 442 74
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	re)	3,443.74

In re	Joshua Bryan Noble,	Case No.
	Amanda Gail Noble	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. 7769  United Collection Bureau 5020 Southwyck Blvd. Toledo, OH 43614	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  06/05 Medical services	CONTINGENT	UNLIQUIDATED	S P U T F	AMOUNT OF CLAIM
Account No. 20550784  United Collection Bureau, Inc. 5620 Southwyck Blvd Ste Toledo, OH 43614		J	Opened 11/01/07 Collection for BC Missouri Emergency Physician's LLP				172.00
Account No. 14347769  United Collection Bureau, Inc. 5620 Southwyck Blvd Ste Toledo, OH 43614		J	Opened 6/01/05 Collection for BC Missouri Emergency Physicians LLP				184.00
Account No.							1,5100
Account No.							
Sheet no. <b>_6</b> of <b>_6</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of t	Subt			374.00
			(Report on Summary of So	Т	ota	ıl	17,926.04

•	
l n	ra
	10

Joshua Bryan Noble, Amanda Gail Noble

Case No.		

Debtors

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

In re	Joshua Bryan Noble, Amanda Gail Noble

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

	Joshua Bryan Noble
In re	Amanda Gail Noble

Case No.

Debtor(s)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF	DEBTOR AND SPO	OUSE		
	RELATIONSHIP(S):	AGE(S):			
	Son	12			
Married	Daughter	6			
	Niece	7			
	Nephew	9			
<b>Employment:</b>	DEBTOR	<u> </u>	SPOUSE		
Occupation	Welder				
Name of Employer	Landfill Equipment				
How long employed	2 1/2 years				
Address of Employer	1535 McNutt Road Herculaneum, MO 63048				
INCOME: (Estimate of avera	age or projected monthly income at time case filed)		DEBTOR		SPOUSE
	ry, and commissions (Prorate if not paid monthly)	\$	4,297.06	\$	0.00
2. Estimate monthly overtime		\$	0.00	\$	0.00
A GLIDWOWAY					
3. SUBTOTAL			4,297.06		0.00
4. LESS PAYROLL DEDUC	TIONS				
<ol> <li>Payroll taxes and soci</li> </ol>	al security	\$	1,113.41	\$	0.00
b. Insurance		\$	280.93	\$	0.00
c. Union dues		\$	0.00	\$ _	0.00
d. Other (Specify):	Child Support Garnishment	\$	315.25	\$	0.00
(, ),		\$	0.00	\$	0.00
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$	1,709.59	\$	0.00
6. TOTAL NET MONTHLY	TAKE HOME PAY	\$	2,587.47	\$	0.00
7. Dagular in same from an are	otion of hyginage on must ession on form (Attach detailed statement		0.00	Ф.	0.00
	ation of business or profession or farm (Attach detailed statem	nent) \$	0.00	\$ <u></u>	0.00
8. Income from real property		ъ <u> </u>	0.00	\$ <u></u>	0.00
9. Interest and dividends  10. Alimony, maintanenes or support payments payable to the debter for the debter's use or that of		* that of	0.00	\$ <u> </u>	0.00
<ol> <li>Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above</li> </ol>		\$	0.00	\$	0.00
11. Social security or government					
	ary Assistance for Niece and Nephew	\$	0.00	\$	234.00
	pport for son		0.00	\$	271.38
12. Pension or retirement inco	ome	\$	0.00	\$	0.00
13. Other monthly income					
(Specify):		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
14. SUBTOTAL OF LINES 7	7 THROUGH 13	\$	0.00	\$_	505.38
15. AVERAGE MONTHLY	INCOME (Add amounts shown on lines 6 and 14)	\$	2,587.47	\$_	505.38
16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals from line 15	5)	\$	3,092	2.85

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: Debtor (Wife) works at H&R Black and the job is seasonal; salary will decrease or may lose her job.

	Joshua Bryan Noble
In re	Amanda Gail Noble

Case No.	Cuse 110.
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Debtor(s)

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

$\square$ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separate	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	400.00
a. Are real estate taxes included? Yes No _X		
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$	258.00
b. Water and sewer	\$	0.00
c. Telephone	\$	175.00
d. Other See Detailed Expense Attachment	\$	100.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	600.00
5. Clothing	\$	75.00
6. Laundry and dry cleaning	\$	25.00
7. Medical and dental expenses	\$	190.00
8. Transportation (not including car payments)	\$	640.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	35.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	126.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	_	
(Specify) Personal Property Taxes	\$	17.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	· <del></del>	
plan)		
a. Auto	\$	0.00
b. Other World Finance (2000 Dodge Durango)	\$	123.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Child Care	\$	200.00
Other School lunches and supplies	\$ <del></del>	125.00
Office Common tandents and a superior	Ψ	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	3,089.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
	-	
20. STATEMENT OF MONTHLY NET INCOME	Φ.	0.000.05
a. Average monthly income from Line 15 of Schedule I	\$	3,092.85
b. Average monthly expenses from Line 18 above	\$	3,089.00
c. Monthly net income (a. minus b.)	\$	3.85

B6J (Official Form 6J) (12/07)				
	Joshua Bryan Noble			
In re	<b>Amanda Gail Noble</b>			

	Case No.	
Debtor(s)		

# $\frac{SCHEDULE\ J\text{ - }CURRENT\ EXPENDITURES\ OF\ INDIVIDUAL\ DEBTOR(S)}{Detailed\ Expense\ Attachment}$

### **Other Utility Expenditures:**

Trash Hauling	\$ 10.00
Satellite Dish	\$ 90.00
Total Other Utility Expenditures	\$ 100.00

## **United States Bankruptcy Court Eastern District of Missouri**

In re	Joshua Bryan Noble Amanda Gail Noble			
		Debtor(s)	Chapter	7

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury sheets, and that they are true and correct to		ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief.	22
Date	May 13, 2011	Signature	/s/ Joshua Bryan Noble Joshua Bryan Noble Debtor	
Date	May 13, 2011	Signature	/s/ Amanda Gail Noble Amanda Gail Noble Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

### United States Bankruptcy Court Eastern District of Missouri

In re	Joshua Bryan Noble Amanda Gail Noble		Case No.		
		Debtor(s)	Chapter	7	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT <b>\$41,810.00</b>	SOURCE <b>2009 Income (Husband)</b>
\$39,244.00	2010 Income (Husband)
\$15,866.05	2011 Income (Husband)
\$7,382.00	2009 Income (Wife)
\$11,319.00	2010 Income (Wife)
\$3,764.29	2011 Income (Wife)

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$2,713.80 2009 Child Support Received by Wife \$2,713.80 2010 Child Support Received by Wife \$1,085.52 2011 Child Support Received by Wife

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL
OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

IVE THE TRUBELSS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

MATURE OF
PROCEEDING

AND LOCATION

Midland Funding, LLC v. Joshua Noble; Case
No. 11MD-AC00090

NATURE OF
PROCEEDING
AND LOCATION

Madison County Circuit Court,
Capital One Bank

Fredericktown, Missouri

STATUS OR
MRAD LOCATION

DISPOSITION

Consent
Judgment

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

AMOUNT OF MONEY

OF PROPERTY

### 9. Payments related to debt counseling or bankruptcy

None П

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

DATE OF PAYMENT. NAME AND ADDRESS NAME OF PAYOR IF OTHER OR DESCRIPTION AND VALUE OF PAYEE THAN DEBTOR Seufert & Dudley, P.C. 4-25-11 \$1,151.00

P.O. Box 831 144 Walker Road Farmington, MO 63640

**Green Path Debt Solutions** 4-25-11 \$100.00 38505 Country Club Drive, Suite 250

Farmington, MI 48331

### 10. Other transfers

None П

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,

RELATIONSHIP TO DEBTOR 7/2010

**Homeq Servicing** 

DESCRIBE PROPERTY TRANSFERRED DATE AND VALUE RECEIVED

Home located at 650 Highway M, Park Hills, Missouri 63601; was sold at short sale for

\$75,000.00

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER **DEVICE** 

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

### 11. Closed financial accounts

None П

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION Commerce Bank

1040 East Karsch Blvd. Farmington, MO 63640

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE **Checking Account** 

AMOUNT AND DATE OF SALE OR CLOSING 2010; zero balance

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 650 Highway M, Park Hills, MO 63601

NAME USED

Joshua and Amanda Noble

DATES OF OCCUPANCY

2007 - 2/2010

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE **ENVIRONMENTAL** 

IAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF NOTICE **ENVIRONMENTAL** 

GOVERNMENTAL UNIT NOTICE LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

### NAME AND ADDRESS

### DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

### 20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY INV

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

## 21 . Current Partners, Officers, Directors and Shareholders

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	May 13, 2011	Signature	/s/ Joshua Bryan Noble
		•	Joshua Bryan Noble
			Debtor
Date	May 13, 2011	Signature	/s/ Amanda Gail Noble
		•	Amanda Gail Noble
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

# United States Bankruptcy Court Eastern District of Missouri

		Eastern Distr	rict of Missouri		
T.,	Joshua Bryan Noble			C N-	
In re	Amanda Gail Noble		Debtor(s)	Case No. Chapter	7
		1	Debioi(s)	Chapter	
	CHAPTER 7 IN	DIVIDUAL DEBTO	R'S STATEMENT	OF INTEN	TION
PART	<b>A</b> - Debts secured by property of property of the estate. Attach a			ted for <b>EACI</b>	I debt which is secured by
Proper	rty No. 1				
	tor's Name: Fargo/Wachovia		Describe Property S 2002 Toyota Tundra		:
Prope	rty will be (check one):		1		
-	Surrendered	☐ Retained			
	ining the property, I intend to (check I Redeem the property I Reaffirm the debt I Other. Explain		oid lien using 11 U.S.C	C. § 522(f)).	
Prope	rty is (check one):				
	Claimed as Exempt		■ Not claimed as exc	empt	
			٦		
Proper	rty No. 2				
	tor's Name: I Finance Company		Describe Property S 2000 Dodge Durang		:
Prope	rty will be (check one):		<u>l</u>		
	1 Surrendered	Retained			
	ining the property, I intend to (check Redeem the property	at least one):			
	Reaffirm the debt			= 3 === (0)	
Ш	Other. Explain	(for example, avo	oid lien using 11 U.S.C	. § 522(t)).	
Proper	rty is (check one):				
	Claimed as Exempt		☐ Not claimed as exc	empt	
	<b>B</b> - Personal property subject to une additional pages if necessary.)	expired leases. (All three	columns of Part B mu	ıst be complete	d for each unexpired lease.
Proper	rty No. 1	7			
Lessoi	r's Name: E-	Describe Leased Pro	operty:	Lease will be U.S.C. § 365	Assumed pursuant to 11 (p)(2):

☐ YES

□ NO

B8 (Form 8) (12/08) Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	May 13, 2011	Signature	/s/ Joshua Bryan Noble	
		-	Joshua Bryan Noble	
			Debtor	
Date	May 13, 2011	Signature	/s/ Amanda Gail Noble	
		C	Amanda Gail Noble	
			Ioint Debtor	

## United States Bankruptcy Court Eastern District of Missouri

Joshua Bryan Noble Amanda Gail Noble		Case No.	
	Debtor(s)	Chapter <b>7</b>	

	Decito(6)	Спари		
	DISCLOSURE OF COMPENSATION OF ATTORN	EY FOR	DEBTOR(S)	
1.	1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am t compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	agreed to be	paid to me, for services render	and that red or to
	For legal services, I have agreed to accept	\$	1,151.00	
	Prior to the filing of this statement I have received		1,151.00	
	Balance Due	\$	0.00	
2.	2. The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	3. The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	I have not agreed to share the above-disclosed compensation with any other person unle	ess they are n	nembers and associates of my la	w firm.
<ol> <li>6.</li> </ol>	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determ</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which ma</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and a</li> <li>d. [Other provisions as needed]</li> <li>Exemption planning; preparation and filing of reaffirmation agreemen</li> <li>5. By agreement with the debtor(s), the above-disclosed fee does not include the following ser</li> <li>Representation of the debtors in any dischargeability actions, judicia</li> </ul>	the bankrupt ining whethe y be required ny adjourned ats (2) and a vice:	attached. An attorney may be cy case, including: r to file a petition in bankruptcy; hearings thereof; applications as needed.	; ; ons or
	any other adversary proceeding, preparation and filing of motions pu of liens on household goods, any adjourned or subsequent meeting of reaffirmation agreements, motion to amend or add creditors; any dep expressly provided for on Bankruptcy Fee Contract.	of creditors	; preparation of more than	
	CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agreement or arrangement for pay this bankruptcy proceeding.	ment to me f	or representation of the debtor(s	s) in
Da	Dated: May 13, 2011 /s/ Kenneth A. Seufe	ert		
	Kenneth A. Seufert 2			
	Seufert & Dudley, P. P.O. Box 831	C.		
	144 Walker Road			
	Farmington, MO 636			
	(573) 756-7555 Fax:		0183	
	cwinch@seufert-duc	iley.com		

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

Case No. (if known)

## **United States Bankruptcy Court Eastern District of Missouri**

In re	Joshua Bryan Noble Amanda Gail Noble		Cas	e No.	
		Debt	or(s) Cha	apter <b>7</b>	
			O CONSUMER DE BANKRUPTCY COI	` ,	
Code.	I (We), the debtor(s), affirm that I (we)	Certification of have received and reaches		quired by §	342(b) of the Bankruptcy
	a Bryan Noble da Gail Noble	X	/s/ Joshua Bryan Noble		May 13, 2011
Printed	d Name(s) of Debtor(s)		Signature of Debtor		Date
Case N	No. (if known)	X	/s/ Amanda Gail Noble		May 13, 2011

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

## United States Bankruptcy Court Eastern District of Missouri

In re	Amanda Gail Noble		Case No.	
		Debtor(s)	Chapter	7
	VERIFICA	TION OF CREDITOR N	<b>AATRIX</b>	
contai	The above named debtor(s) hereby centining the names and addresses of my createte.			
		/s/ Joshua Bryan No	ble	
		Joshua Bryan Noble		
		Debtor		
		/s/ Amanda Gail Nob	ole	
		Amanda Gail Noble		
		Joint Debtor		
		Dated: <b>May 13</b> , <b>2</b> 0	011	

Joshua Bryan Noble

Account Resolution P. O. Box 1568 Springfield, MO 65808-1568

Account Resolution Corporation 17600 Chesterfirld Ste 201 Chesterfield, MO 63005

Accounts Receivable Tracking Services P. O. Box 464 Jefferson City, MO 65102

Applied Card Bank Attention: General Inquiries P. O. Box 17125 Wilmington, DE 19850

Berlin Wheeler Inc. 711 West McCarty Street Jefferson City, MO 65101

Berlin-Wheeler P.O. Box 463 Jefferson City, MO 65102

Capital One, N.A. Bankruptcy Dept P. O. Box 5155 Norcross, GA 30091

CBS Collection Paducah 100 Fulton Court Paducah, KY 42001

CBS Collection Paducah 100 Fulton Ct. Paducah, KY 42001

Consumer Adjustment Company 12855 Tesson Ferry Rd Saint Louis, MO 63128

Consumer Collection Management 2333 Grissom Drive Saint Louis, MO 63146

Consumer Collection Management 2333 Grissom Drive Saint Louis, MO 63146

Consumer Collection Management Inc. P. O. Box 1839 Maryland Heights, MO 63043

Credit Bureau Services P. O. Box 908 Cape Girardeau, MO 63702

Credit Bureau Systems P. O. Box 9200 Paducah, KY 42002

Credit Bureau Systems, Inc. P. O. Box 9200 Paducah, KY 42002-9200

Credit Bureau Systems, Inc. P. O. Box 9200 Paducah, KY 42002-9200

EOS CCA 700 Longwater Drive Norwell, MA 02061

EOS CCA 700 Longwater Drive Norwell, MA 02061

EOS CCA P. O. Box 296 Norwell, MA 02061-0296

Equable Ascent Financial/Hilco Rec. 1120 Lake Cook Road Suite B Buffalo Grove, IL 60089

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Franklin Collection Services 2978 W Jackson St Tupelo, MS 38801

Franklin Collection Services 2978 W. Jackson Street Tupelo, MS 38801

Hilco Receivables Attn: Bankruptcy 1120 Lake Cook Road Suite B Buffalo Grove, IL 60089

Household Credit Services P. O. Box 98706 Las Vegas, NV 89193-8706 HSBC Bank
P. O. Box 5253
Carol Stream, IL 60197

Mail Processing Center P. O. Box 31409 Nashville, TN 37204

Mark S. Schiffman, DDS 4123 Jeffco Blvd. Arnold, MO 63010-4215

Medical Data Systems 2001 9th Avenue Suite 312 Vero Beach, FL 32960

Medical Services BillingTechnologies P. O. Box 22266 Chattanooga, TN 37422

Midland Credit Management P. O. Box 939019 San Diego, CA 92193

Midland Credit Management P. O. Box 939019 San Diego, CA 92193

Midland Credit Management P. O. Box 939019 San Diego, CA 92193

Midland Credit Management, Inc. P. O. Box 60578 Los Angeles, CA 90060-0578

Midland Funding LLC C/O Kramer & Frank 9300 Dielman Industrial Drive Suite 100 Saint Louis, MO 63132-2205

Mineral Area Association P. O. Box 25108 Chattanooga, TN 37422

Mineral Area Regional Med Ct, Inc. MH 751 Maple Valley Drive, Suite B Farmington, MO 63640

Mineral Area Regional Medical Center 1212 Weber Road Farmington, MO 63640

Missouri Department of Labor & Ind Rel. Division of Employment Security P.O. Box 3100 Jefferson City, MO 65102-3100

Parkland Health Center P.O. Box 957683 Saint Louis, MO 63195-7683

United Collection Bureau 5020 Southwyck Blvd. Toledo, OH 43614

United Collection Bureau, Inc. 5620 Southwyck Blvd Ste Toledo, OH 43614

United Collection Bureau, Inc. 5620 Southwyck Blvd Ste Toledo, OH 43614

Wells Fargo/Wachovia P.O. Box 19657 Irvine, CA 92623

World Finance Company 1211 Maple Street, Unit B Farmington, MO 63640

In re	Joshua Bryan Noble Amanda Gail Noble	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case N	lumber:	☐ The presumption arises.
	(If known)	■ The presumption does not arise.
		$\square$ The presumption is temporarily inapplicable.

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by \$707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
111	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	<ul> <li>b. □ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>□ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>

		Part II. CALCULATION OF M	ON	THLY INCO	ME FOR § 707(b)('	7) E	EXCLUSION		
		tal/filing status. Check the box that applies a				emei	nt as directed.		
	<ul> <li>a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</li> <li>b. □ Married, not filing jointly, with declaration of separate households. By checking this box, declaration of separate households.</li> </ul>						or declares under	ner	alty of periury:
	,	'My spouse and I are legally separated under a	appl	icable non-bankrup	otcy law or my spouse an	d I a	are living apart o	ther	than for the
2		ourpose of evading the requirements of § 7076 for Lines 3-11.	(b)(2	2)(A) of the Bankru	ptcy Code." <b>Complete</b> of	only	column A ("Del	btoı	's Income'')
	с. 🗆	1 Married, not filing jointly, without the decla ("Debtor's Income") and Column B ("Spou		b ab	ove. Complete b	oth	Column A		
	d.	Married, filing jointly. Complete both Colu	mn	A ("Debtor's Inco	ome") and Column B ("	Spo	ouse's Income")	for	Lines 3-11.
		gures must reflect average monthly income re- dar months prior to filing the bankruptcy case					Column A		Column B
	the fil	ling. If the amount of monthly income varied	dur	ing the six months,			Debtor's		Spouse's
		onth total by six, and enter the result on the a					Income		Income
3	<del>                                     </del>	s wages, salary, tips, bonuses, overtime, con				\$	3,638.92	\$	1,001.36
		ne from the operation of a business, profess the difference in the appropriate column(s) of							
	busin	ess, profession or farm, enter aggregate numb	ers a	and provide details	on an attachment. Do				
4		nter a number less than zero. <b>Do not include b as a deduction in Part V.</b>	any	part of the busine	ss expenses entered on				
4	Line	b as a deduction in 1 art v.		Debtor	Spouse				
	a.	Gross receipts	\$	0.00					
	b. c.	Ordinary and necessary business expenses Business income	\$ Su	btract Line b from 1	· ·	\$	0.00	\$	0.00
		s and other real property income. Subtract l	•			1		-	
	the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any</b>								
5	part	of the operating expenses entered on Line b	as a	Debtor	Spouse				
	a.	Gross receipts	\$	0.00	\$ 0.00				
	b.	Ordinary and necessary operating expenses Rent and other real property income	\$	<b>0.00</b> btract Line b from 1		¢	0.00	¢.	0.00
		<u> </u>	Su	btract Line o from i	Lille a	\$			
6		est, dividends, and royalties.				\$	0.00		0.00
7		on and retirement income.		1 1	41 1 1. 1.1	\$	0.00	\$	0.00
		amounts paid by another person or entity, on uses of the debtor or the debtor's dependent							
8	purp	ose. Do not include alimony or separate maint	ena	nce payments or an	nounts paid by your				
		te if Column B is completed. Each regular parayment is listed in Column A, do not report the				\$	0.00	\$	0.00
	Unen	ployment compensation. Enter the amount i	n th	e appropriate colun	nn(s) of Line 9.				
		ever, if you contend that unemployment composit under the Social Security Act, do not list the							
9	benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:								
		mployment compensation claimed to benefit under the Social Security Act Debtor	r \$	<b>0.00</b> Spo	ouse \$ 0.00	\$	0.00	\$	0.00
		ne from all other sources. Specify source and							
		separate page. Do not include alimony or sep							
	spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments								
10	received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.								
	Debtor Spouse								
		Child Support	\$	0.00					
	b. Total	and enter on Line 10	\$		\$	\$	0.00	Ф	271.38
11		otal of Current Monthly Income for § 707(b	)(7)	• Add Lines 3 thm	10 in Column A and if	4	0.00	ф	211.30
11		nn B is completed, add Lines 3 through 10 in				\$	3,638.92	\$	1,272.74

12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		4,911.66
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	58,939.92
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: MO b. Enter debtor's household size: 6	\$	84,832.00
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.		
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption of top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.	does no	ot arise" at the
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULA	TION OF CUR	RENT	MONTHLY INCOM	ME FOR § 707(b)(2	2)
16	Enter the amount from Line 12.					\$
17						
	a. b. c. d. Total and enter on Line 17			\$ \$ \$		\$
18	Current monthly income for § 70'	7(b)(2). Subtract Line	e 17 fro	m Line 16 and enter the res	ult.	\$
	Part V. C.	ALCULATION (	OF D	EDUCTIONS FROM	INCOME	
	Subpart A: Dec	luctions under Sta	ndard	s of the Internal Revenu	ie Service (IRS)	
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.					
	a1. Allowance per person		a2.	Persons 65 years of age Allowance per person	or older	
	b1. Number of persons		b2.	Number of persons		\$
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$	

20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.    IRS Housing and Utilities Standards; mortgage/rental expense		
			\$
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		
	Local Standards: transportation; vehicle operation/public transp	oortation expense.	
	You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are		
22A	included as a contribution to your household expenses in Line 8.		
	☐ 0 ☐ 1 ☐ 2 or more.  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards:  Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or		
	Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		\$
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.		
	a. IRS Transportation Standards, Ownership Costs	\$	
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.		
	a. IRS Transportation Standards, Ownership Costs	\$	
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.		

Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payoll deductions that are renipolyment, such as retriement contributions, union dues, and uniform costs.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term in insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: clustention for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: challenged dependent child for whom no public education of childcare - such as bay-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: chealth care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or pind by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services other than your basic home telephone and cell phone service - such as pages. and with a payments for health insurance or health savings accounts listed in Line 19B. Do not include payments for health insurance or health savings account such as page and the payments of the payments of the payments of the late of the paymen				
28   Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day acte, narrow need that is required for the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents. Bo not include payments by a health savings account so the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.    30   Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.	26	deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs.	\$	
Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childeare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  3 Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.  Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32  Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out i	27	life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for	\$	
the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  30  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  S  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  31  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  S  Subpart B: Additional Living Expense Deductions  Note: Do not include any expenses that you have listed in Lines 19-32  Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  a. Health Insurance \$	28	pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not</b>		
childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  Subpart B: Additional Living Expense Deductions  Note: Do not include any expenses that you have listed in Lines 19-32  Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  a. Health Insurance b. Disability Insurance c. Health Savings Account  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violenc	29	the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education	\$	
health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.    Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.    33	30		\$	
actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.    33   Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.   \$	31	health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. <b>Do not</b>	\$	
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32    Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.   a.   Health Insurance   \$	32	actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and	\$	
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.    a.   Health Insurance   \$	33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.	\$	
the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.    a.   Health Insurance   \$	Note: Do not include any expenses that you have listed in Lines 19-32			
a. Health Insurance b. Disability Insurance c. Health Savings Account  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$	3/1	the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your		
C. Health Savings Account \$  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$  Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.  \$  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or	34	a. Health Insurance \$		
Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$		b. Disability Insurance \$		
If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:    Sample   Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.    Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or		c. Health Savings Account \$	\$	
below:  \$  Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.  \$ Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or				
expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.  \$  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or		below:		
actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or	35	expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such	\$	
	36	actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or	\$	
Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	37	Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount	\$	
Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			\$	
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or				\$
41	<b>Total Additional Expense Deduction</b>	ns under § 707(b). Enter the total of L	ines 34 through 40		\$
		Subpart C: Deductions for De	bt Payment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.				
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.		\$ Total: Add Lines	□yes □no	
44 45	motor vehicle, or other property neces your deduction 1/60th of any amount payments listed in Line 42, in order to sums in default that must be paid in o the following chart. If necessary, list a Name of Creditor  a.  Payments on prepetition priority clapriority tax, child support and alimon not include current obligations, such and the current obligations of the company of the current multiply the amount in line a by the Current multiplier for your dissued by the Executive Officinformation is available at we the bankruptcy court.)	Property Securing the Debt  aims. Enter the total amount, divided by claims, for which you were liable at the as those set out in Line 28.  If you are eligible to file a case under you the amount in line b, and enter the reserved.	rured by your primary f your dependents, you the creditor in addition The cure amount wou re. List and total any  1/60th of th  \$ T y 60, of all priority cl he time of your banks  Chapter 13, complete	a may include in on to the ld include any such amounts in e Cure Amount otal: Add Lines aims, such as ruptcy filing. Do e the following expense.	\$ \$ \$
46	<b>Total Deductions for Debt Payment</b>	Enter the total of Lines 42 through 45	i.		\$
Subpart D: Total Deductions from Income					
47	Total of all deductions allowed under	er § 707(b)(2). Enter the total of Lines	33, 41, and 46.		\$
Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION					
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))			\$	
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))			\$	
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.			\$	
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.			\$	

	<b>Initial presumption determination.</b> Check the applicable box and p	proceed as directed.			
52	☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.  ☐ The amount set forth on Line 51 is more than \$11,725* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.				
53	Enter the amount of your total non-priority unsecured debt		\$		
54	Threshold debt payment amount. Multiply the amount in Line 53 l	by the number 0.25 and enter the result.	\$		
	Secondary presumption determination. Check the applicable box and proceed as directed.				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				
	Part VII. ADDITIONAL F	EXPENSE CLAIMS			
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for				
	each item. Total the expenses.				
Expense Description Monthly Amount					
	a.	\$	y Amount		
	b.	\$			
	c.	\$			
	d.	\$			
	Total: Add Lines a, b,	c, and d \$			
	Part VIII. VERIF	TICATION			
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors				
	must sign.) Date: May 13, 2011	Signature: /s/ Joshua Bryan N	loble		
57		Joshua Bryan Nob			
		(Debtor)			
	Date: <b>May 13, 2011</b>	Signature /s/ Amanda Gail No	oble		
		Amanda Gail Nobl			
		(Joint Deb			

<sup>\*</sup> Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.